			O.B. I atom and	i Trademark Office; U.S	. DEFARTMENT	OF COMMERCE
				Complete if Ki	iown	
Fees pursuant to Consolidated Appropriations Act. 2005 (H.R. 4818)			Application Number 10/644,500			
			Filing Date	August 20, 2003		
FEE TRANSMITTAL			First Named Inventor Terrell, Ross			
	For FY 2006	Examiner Name Davis, Brian J.				
_						
■ Applicant claims small entity status. See 37 CFR 1.27			Art Unit	1621		
TOTAL AMOUNT OF PAYMENT \$1,030.00			Attorney Docket No.	026403.00272		
METHOD OF PAYMENT (check all that apply)						
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):						
■ Deposit Account Deposit Account Number: <u>08-2442</u> Deposit Account Name: <u>Hodgson Russ LLP</u>						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
■ Charge fee(s) indicated below □ Charge fee(s) indicated below, except for the filing fee						
■ Charge any additional fee(s) or underpayments of fee(s) ■ Credit any overpayments						
under 37 CFR 1.16 and 1.17						
WARNING: Inform	nation on this form may bed	ome publ	ic. Credit card inforn	nation should not b	e included on	this form.
	information and authorizat					
				t to a suvahavas		
	ON (All the fees below are d			t to a surcharge.)		
1. BASIC FILING,	SEARCH, AND EXAMINA	ATION FI				
	FILING FEES		SEARCH FEES	EXAMINAT		
	Small Entity		Small Entity	~ (4)	Small Entity	~ ~
Application Type	<u>Fee (\$)</u> <u>Fee (\$)</u>	Fee		<u>Fee (\$)</u>	<u>Fee (\$)</u>	Fees Paid (\$)
Utility	300 150	50		200	100	
Design	200 100	10		130	65	
Plant	200 100	30		160	80	
Reissue	300 150	50		600	300	····
Provisional	200 100	0	0	0	0	
2. EXCESS CLAIM F	EES					<b>Small Entity</b>
Fee Description					<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (inc	luding Reissues)				50	25
Each independent claim	over 3 (including Reissues)				200	100
Multiple dependent clair					360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	<u>Multir</u>	ole Dependent C	<u>laims</u>
	r HP = x			Fee(\$)	Fee Paid	(\$)
HP = highest number of	total claims paid for, if greater	than 20		•		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
	$HP = 0 \qquad x$		===			
HP = highest number of independent claims paid for, if greater than 3						
3. APPLICATION SIZE FEE						
		a of manar	(avaludina alaatraniaal	ly filed sequence or	· computer listi	agg under 27
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35						
		(\$123 lor :	sman entity) for each at	iditional 30 sheets (	or maction there	:01. See 33
U.S.C. 41(a)(1)(G) ar			1 1111 1 100 0	· · · · · · · · · · · · · · · · · · ·	T) 1	C D. 14 (6)
Total Sheets	$\frac{\text{Extra Sheets}}{0.00} = \frac{0.000}{0.000} = \frac{0.000}{0.000}$		ch additional 50 or fract		<u> </u>	Fee Paid (\$)
	JU - U/3U =	(ro	and up to a whole number	r) x		
4. OTHER FEE(S)					<u>]</u>	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing	surcharge): Issue fee (\$700)	); Publicat	on fee (\$300); Advance	e copies (\$30)	:	\$1,030.00
SUBMITTED BY						
		Talankana 717	056 4000			
Signature	1. levo //exerts	Registration No. (Attorney/Agent)	40,786 Telephone 716-856-4000			
No. of Oak of the N			• (* **********************************		Data Fahana	22 2007
Name (Print/Type)	R. Kent Roberts				Date February	23, 2007
I hereby certify that this co	rrespondence is being electronically	transmitted	o the U.S. Patent and Traden	Mk Office on the date s	hown below.	
D. Vant Dahart	D-4 P-1	, 22 2007	K. Jews J	Next		
R. Kent Roberts Name	Date: February	23, ZUU <i>I</i>	Signature			
			DISHUHUE			